| PATENT APPLICATION FEE DETERMINATION RECORD  Effective October 1, 2000  Application of Decker Number  104 722 U.S.O. |  |   |              |                      |                               |                  |    |                  |                        |    |                     |                        |
|--|--|---|--------------|----------------------|-------------------------------|------------------|----|------------------|------------------------|----|---------------------|------------------------|
| CLAIMS AS FILED - PART I (Column 1) (Column 2)   |  |   |              |                      |                               |                  |    | SMÁLL EM<br>TYPE | mπγ<br>□               | OR | OTHER<br>SMALL      |                        |
| TO   | TAL CLAIMS                                     |   | 19           |                      |                               |                  |    | RATE             | FEE                    |    | RATE                | FEE                    |
| FO   | R  |   | NUMBER FILED |                      | NUMBER EXTRA                  |                  |    | Basic Fee        | 355.00                 | OR | BASIC FEE           | ·710.00                |
| το   | TAL CHARGEA                                    | BLE CLAIMS                                | 9 minus 20=  |                      | · •                           |                  |    | X\$ 9=           | 1                      | OR | X\$18=              |                        |
| IND  | EPENDENT CL                                    | AIMS                                      | 6 minus 3 =  |                      | 3                             |                  |    | X40=             | 120                    | OR | X80=                |                        |
| MULTIPLE DEPENDENT CLAIM PRESENT   |  |   |              |                      |                               |                  |    | +135=            | -                      | OR | +270=               |                        |
| * If the difference in column 1 is less than zero, enter "0" in column 2   |  |   |              |                      |                               |                  |    | TOTAL            | 475                    | OR | TOTAL               |                        |
| CLAIMS AS AMENDED - PART II  |  |   |              |                      |                               |                  |    |                  |                        | p  | OTHER               | THAN                   |
| (Column 1) (Column 2) (Column 3)   |  |   |              |                      |                               |                  |    | SMALL            |                        | ЮŔ | SMALL               |                        |
| NT A   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENOMENT |              | NUM<br>PREVN<br>PAID | BER                           | PRESENT<br>EXTRA |    | RATE             | ADDI-<br>TIONAL<br>FEE | -  | RATE                | ADDI-<br>TIONAL<br>FEE |
| AMENDMENT  | Total  | .14                                       | Minus        | 7                    | 0                             | = /              |    | X\$ 9=           | 1                      | OR | X\$18=              | ,                      |
| MER  | independent                                    | · 3                                       | Minus        | ***                  | 6                             | 2                |    | X40=             |                        | OR | X80=                | 7                      |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |              |                      |                               |                  |    | +135=            |                        | OR | +270=               |                        |
|  |  |   |              |                      |                               |                  | į  | TOTAL            | +                      | 00 | TOYAL<br>ADDIT, FEE |                        |
| 9-2-05 (Column 1) (Column 2) (Column 3)  |  |   |              |                      |                               |                  |    |                  |                        |    |                     |                        |
| AMENDMENT B  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | NUR                  | HEST<br>HBER<br>OUSLY<br>FOR  | PRESENT<br>EXTRA |    | RATE             | ADDI-<br>TIONAL<br>FEE |    | RATE                | ADDI-<br>TIONAL<br>FEE |
| Į.   | Total  | . 14                                      | Minus        | -2                   | 0                             | •/               | ]  | X\$ 9=           |                        | OR | X\$18=              |                        |
| ME   | Independent                                    | . 3'                                      | Minus        | <del> (</del>        | 2                             | •                |    | X40=             |                        | OR | X80=                |                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |  |   |              |                      |                               |                  | J  | +135=            |                        | OR | +270=               |                        |
| YOTAL  |  |   |              |                      |                               |                  |    |                  |                        | OR | TOTAL               |                        |
| (Column 1) (Column 2) (Column 3)   |  |   |              |                      |                               |                  |    |                  |                        |    |                     |                        |
| ENTC   |  | CLAIMS REMAINING AFTER AMENOMENT          |              | HIGH<br>NUL<br>PREVI | HEST<br>HBER<br>HOUSLY<br>FOR | PRESENT<br>EXTRA |    | RATE             | ADDI-<br>TIONAL<br>FEE |    | RATE                | ADDI-<br>TIONAL<br>FEE |
| Ş  | Total  | •.  | Minus        | 40                   |                               | Đ                |    | X\$ 9==          |                        | OR | X\$18=              | 1                      |
| AMENDMENT  | Independent                                    | •   | Minus        | ***                  |                               | •                | 11 | X40=             |                        | OR | X80=                |                        |

"If the entry in column 1 is less than the entry in column 2, write "V" in column 3.

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

ADDIT, FEE

OR ADDIT, I

The "Highest Number Previously Paid For" (Noted or Independent) is the highest number found in the appropriate box in column 1.

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM

+135=

+270=

OR ADDIT. FEE

B. . I. . 4 11. . . . 1 . . .